

MULTIPLE INDEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO. 10700487

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/					
2	/					
3						
4	/	/				
5	/					
6	/	/				
7	2					
8	2					
9	1	2				
10	1					
11		1				
12		1				
13	1	1				
14	1	1				
15	1					
16	1					
17	2					
18	2					
19	1	2				
20	1					
21		1				
22		1				
23	1					
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25	1	1				
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27	2					
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29	1	2				
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TOTAL IND.	3					
TOTAL DEP.	39					
TOTAL CLAIMS	32					

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						